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		\ <b>\}</b>	₽/ □	Korlin	Trindul		(Signature)		
		No.		December 21,			(Date)		
							(Bate)		
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DO	CKET NO.	CONFIRMATION NO.		
10/535,607	05/19/2005		Tomoyuki Miyake 63476 (70904)			904)	7602		
TITLE OF INVENTION CONTAINING THE RE		-	ON METHOD, REPROI	DUCTION PROGR	AM, AND REG	CORDING M	IEDIUM		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL	FEE(S) DUE	DATE DUÉ		
nonprovisional	NO	\$1440	\$300	\$0	07 HGEBREN2 (	\$1740 36066024 04	01/14/2008 1105 10535607		
EXAM	INER	ART UNIT	CLASS-SUBCLASS						
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1. Change of corresponde CFR 1.363).	ence address or indicatio	n of "Fee Address" (37	2. For printing on the p		15.	3.83 DA David G.	Conlin		
	ondence address (or Cha 3/122) attached.	nge of Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a						
"Fee Address" ind PTO/SB/47; Rev 03-0 Number is required.	ication (or "Fee Address' 2 or more recent) attach	"Indication form led. Use of a Customer	registered attorney or agent) and the names of up to				Angell Palmer &		
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or ty	pe)			· · · · · · · · · · · · · · · · · · ·		
PLEASE NOTE: Unl recordation as set fort	ess an assignee is ident h in 37 CFR 3.11. Comp	ified below, no assignee bletion of this form is NO	data will appear on the p T a substitute for filing an	atent. If an assigne assignment.	ee is identified b	oclow, the do	cument has been filed for		
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SHARP KABUSH	IKI KAISHA		OSAKA	JAPAN					
Please check the appropr	iate assignce category or	categories (will not be pr	rinted on the patent):	Individual 🛣 Co	rporation or other	er private grou	up entity Government		
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Issue Fee			A check is enclosed.						
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Advance Order - 4	of Copies10	<del></del>	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).						
5. Change in Entity Sta	tus (from status indicated	d above)							
a. Applicant claim	s SMALL ENTITY statu	is. See 37 CFR 1.27.	☐ b. Applicant is no lon	ger claiming SMAL	LL ENTITY state	us. See 37 CF	R 1.27(g)(2).		
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Authorized Signature	15 vanu	il C. Tuene-		Date De	ecember 21,	2007			
Typed or printed name		Tucker		Registration N	o. <b>27,8</b>	40	<u> </u>		
This collection of inform an application. Confiden	ation is required by 37 C	FR 1.311. The information U.S.C. 122 and 37 CFR	on is required to obtain or in 1.14. This collection is es	retain a benefit by the	he public which ninutes to compl	is to file (and lete, including	by the USPTO to process) g gathering, preparing, and		

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ation No. (if known): 10/535,607

Attorney Docket No.: 63476(70904)

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	F#	04	Complete if Known										
Fees pursuant to t	Effective on 12/08/20 the Consolidated Appropri	Application Number 10		10/535,607-Conf. #7602									
FFF	ETRANSI	Filing Date	V	May 19, 2005									
	-	First Named Inv	entor T	Tomoyuki Miyake									
	For FY 20	Examiner Name	P	Agustin, Peter Vincent									
Applican	t claims small entity status	Art Unit 2627											
TOTAL AMOUNT	OF PAYMENT	Attorney Docket No. 63476(709			4)								
METHOD OF PAYMENT (check all that apply)													
Check Credit Card Money Order None Other (please identify):													
x Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge													
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)													
	harge fee(s) indicated		<del></del> -	-		cept for th	ne filina fee						
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FEE CALCUI	e(s) under 37 CFR 1.1 ATION	o and 1.17											
1. BASIC FILIN	G, SEARCH, AND EX	AMINATION FEES											
	FIL		ARCH FEES	EXAMIN	ATION FEES								
Application Ty	ype Fee (\$)	Small Entity Fee (\$) Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees F	aid (\$)						
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Design	210	105 100	50	130	65								
Plant	210	105 100	155	160	80								
Reissue	310	155 510	255	620	310								
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Provisional	210	103 0	0	0	0								
2. EXCESS CLA	-					Fee (\$)	Small Entity Fee (\$)						
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Indep. Claims	Extra Claims	Fee (\$) Fee	Paid (\$)				_						
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HP = highest num	ber of independent claims p	aid for, if greater than 3.											
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sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).													
Total Sheets         Extra Sheets         Number of each additional 50 or fraction thereof         Fee (\$)         Fee Paid (\$)           - 100 =													
4. OTHER FEE			(locale up to a wife	ole Hallibery /	`	Fees	Paid (\$)						
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			•			1,4	40.00						
Other (e.g., late filing surcharge): 1501 Utility issue fee 1504 Publication fee for early, voluntary, or norm						300.00							
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SUBMITTED BY													
Signature	Brand C	7 morez	Registration No. (Attorney/Agent)	27,840	Telephone	(617) 51	7-5508						
Name (Print/Type)	David A. Tucker		Date December 21, 2007				21, 2007						